

# Indiana State Police Clandestine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

**Date:** 07/18/2013  
**Incident #:** 13ISPC006995  
**County:** Decatur

**Address:** 407 S Franklin Street  
Greensburg, IN 47240

**Type of Laboratory Seizure** (check one)

- ☒ Operational Lab  
☐ Chemical/Glassware/Equipment (only)  
☐ Dumpsite (only)

**Seizure Location** (check all that apply)

- ☐ Residence  
☒ Outbuilding  
☐ Vehicle  
☐ Hotel/Motel  
☐ Open – No Structure  
☐ Other: \_\_\_\_\_

**Items Found: Location** (bedroom, kitchen, open air, etc)

(check all that apply)

- ☒ One Pot or Birch Reaction(s): Detached Garage  
☐ Red Phosphorous/Iodine Reaction(s): \_\_\_\_\_  
☒ Hydrochloric Acid Gas Generator(s): Detached Garage  
☒ Flammable Solvents: Detached Garage  
☒ Water Reactive Metal (Lithium): Detached Garage  
☐ Anhydrous Ammonia: \_\_\_\_\_  
☐ Corrosive Acid: \_\_\_\_\_  
☐ Corrosive Base: \_\_\_\_\_  
☐ Other (item and location): \_\_\_\_\_

**Vehicle Information:**

Owner:  
VIN:  
Year:

Make:  
Model:

**Child under age 18 discovered** (check appropriate)

- ☐ Yes \_\_\_\_\_ (number present)  
☒ No  
☐ Children not present but evidence they reside  
or visit often

Living conditions of home: ☐ clean ☐ disarray  
☐ unclean  
Estimated length of time manufacturing had been  
occurring: \_\_\_\_\_  
Additional Information: \_\_\_\_\_

**This report has been faxed\* or emailed to the following agencies that serve the location:**

Fire Department City, Township or County Greensburg FD Fax: \_\_\_\_\_  
Health Department County: Decatur Fax: \_\_\_\_\_  
Department of Child Services Hotline: dcs.hotlinereports@dcs.in.gov Fax: 317-234-7595 or 317-234-7596

For further information regarding this methamphetamine laboratory, contact  
Investigating Officer: Tom Egler Phone 317-234-4591

\*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.